



BUILDING DEPARTMENT
6611 RIDGE ROAD
PARMA, OHIO 44129
440-885-8035
440-885-8039 FAX

DATE MAILED: _____

VACANT COMMERCIAL PROPERTY REGISTRATION

1. Address of Property: _____ PPN: _____

2. Owner Information:

Name: _____ Soc. Sec. No. or E.I.N.: _____
(REQUIRED)

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

3. Local Agent or Representative Information:

Name: _____ Soc. Sec. No. or E.I.N.: _____
(REQUIRED)

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

4. Please list names, addresses and telephone numbers of all persons with any legal interest in the property, building and premises:

5. **Fees:** In accordance with Section 1715.03 of the Codified Ordinances of the City of Parma, a fee of ~~200.00~~ ^{\$300.00} is required to be submitted for the first year of vacancy along with this registration and a vacant building plan.

Payment Due Date: _____. Please make check payable to the City of Parma.

BOARDING OF DOORS AND WINDOWS IS NOT PERMITTED.

For Office Use Only:

Date Paid: _____ Check No.: _____ Receipt No.: _____